#### Application Data Sheet

Application Information

Application Type:: National Stage

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks:: 0

Number of Copies of CDs:: 0

Sequence Submission?:: None

Computer Readable Form (CRF):: No

Number of copies of CRF:: 0

Title:: COMBINATIONS OF VASOACTIVE

AGENTS AND THEIR USE IN THE

TREATMENT OF SEXUAL

DYSFUNCTIONS

Attorney Docket Number:: 2503-1190

Request for Early No.

Publication?::

Request for Non-Publication?:: No Suggested Drawing Figure:: 0

Total Drawing Sheets:: 0

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency::

Contract or Grant Numbers::

Secrecy Order in Parent No

Appl.?::

Applicar	at	Info	rma	tion
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Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: EZIO

Middle Name::

Family Name:: BOMBARDELLI

Name Suffix::

City of Residence:: MILANO

State or Province of

Residence::

Country of Residence:: ITALY

Street of Mailing VIA VAL DI SOLE, 22

Address::

City of Mailing Address:: MILANO

State or Province of Mailing Address::

Country of Mailing Address:: ITALY

Postal or Zip Code of Mailing Address:: I-20141

# Correspondence Information

Correspondence Customer 00466

Number::

## Representative Information

Representative Customer	00466	
Number::		

## Domestic Priority Information

Application::	Continuity	Parent	Parent Filing
	Type::	Application::	Date::
This application	National Stage of	PCT/EP2004/007374	7/6/04

Foreign Priority Information

Country::	Application	Filing Date::	Priority
	Number::		Claimed::
ITALY	MI2003A001428	7/11/03	Yes

## Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::